

# Schedule B

## Freedom of Information Request & Request for Affidavit Certifying Affirmation of Statutory Obligation made to

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide a copy of the original contract (Authenticum) Pursuant to (Carpenter vs. Logan 83 U.S. 271) certifying that they are the actual holder of the original instrument of question and are willing to have it inspected for authenticity in regards to alleged account number # 4986139559 under CUSIP Number

and to provide an Affidavit Certifying their Affirmation that they followed all applicable Federal, State, and contract law in carrying out the alleged contract of note Account # 4986139559 to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim as an Creditor and Holder in Due Course. Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) You produce the original contract (for inspection), front and back pages, with my original signature (no copies) in respect to the alleged contract and state for the record who the alleged original creditor was or Current holder of Original Contract is based on the preceding law
- 2) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 3) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.

You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Citibank allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of Request \_\_\_\_\_

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_  
Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_  
Notary Signature \_\_\_\_\_

## Freedom of Information Request For SEC Registration Status & Securitization Inquiry

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide information from their SEC files or from the files of their Parent Company in reference to alleged account number # 4986139559

This demand is made to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim and interest in respect to the contract-note-security-bond in accordance with all applicable law.

Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) Please provide the name of any parent companies that this financial institution is operating in contract with in respect to the claim herein
- 2) Please provide the EIN number and CUSIP number of this company/corporation/financial institution
- 3) Please provide an affidavit stating that you have enforceable payment interest in the contract account # 4986139559 based on SEC files including all prospectuses 10-K registrations 8-K registrations and all other SEC documents pertaining to the above mentioned claim
- 4) Please provide documents pertaining to any stock, securities, bonds etc associated with this specific account number.
- 5) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 6) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.

You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Citi Bank allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of

Request

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_

Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_

Notary Signature \_\_\_\_\_

## Freedom of Information Request & Request for Affidavit Certifying Affirmation of Statutory Obligation made to

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide a copy of the original contract (Authenticum) Pursuant to (Carpenter vs. Logan 83 U.S. 271) certifying that they are the actual holder of the original instrument of question and are willing to have it inspected for authenticity in regards to alleged account number # 517805919242 under CUSIP Number

and to provide an Affidavit Certifying their Affirmation that they followed all applicable Federal, State, and contract law in carrying out the alleged contract of note Account # 517805919242 to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim as an Creditor and Holder in Due Course. Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) You produce the original contract (for inspection), front and back pages, with my original signature (no copies) in respect to the alleged contract and state for the record who the alleged original creditor was or Current holder of Original Contract is based on the preceding law
- 2) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 3) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.  
You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Capital One allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of Request

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_

Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_

Notary Signature \_\_\_\_\_

## Freedom of Information Request For SEC Registration Status & Securitization Inquiry

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide information from their SEC files or from the files of their Parent Company in reference to alleged account number # 517805919242

This demand is made to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim and interest in respect to the contract-note-security-bond in accordance with all applicable law.

Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) Please provide the name of any parent companies that this financial institution is operating in contract with in respect to the claim herein
- 2) Please provide the EIN number and CUSIP number of this company/corporation/financial institution
- 3) Please provide an affidavit stating that you have enforceable payment interest in the contract account # 517805919242 based on SEC files including all prospectuses 10-K registrations 8-K registrations and all other SEC documents pertaining to the above mentioned claim
- 4) Please provide documents pertaining to any stock, securities, bonds etc associated with this specific account number.
- 5) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 6) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.

You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Capital One allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of

Request

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_

Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_

Notary Signature \_\_\_\_\_



## Freedom of Information Request & Request for Affidavit Certifying Affirmation of Statutory Obligation made to

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide a copy of the original contract (Authenticum) Pursuant to (Carpenter vs. Logan 83 U.S. 271) certifying that they are the actual holder of the original instrument of question and are willing to have it inspected for authenticity in regards to alleged account number # 4266841333737086 under CUSIP Number

and to provide an Affidavit Certifying their Affirmation that they followed all applicable Federal, State, and contract law in carrying out the alleged contract of note Account # 4266841333737086 to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim as an Creditor and Holder in Due Course. Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) You produce the original contract (for inspection), front and back pages, with my original signature (no copies) in respect to the alleged contract and state for the record who the alleged original creditor was or Current holder of Original Contract is based on the preceding law
- 2) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 3) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.

You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Chase  
allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of Request

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_

Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_

Notary Signature \_\_\_\_\_

## Freedom of Information Request For SEC Registration Status & Securitization Inquiry

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide information from their SEC files or from the files of their Parent Company in reference to alleged account number # 4266841333737036

This demand is made to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim and interest in respect to the contract-note-security-bond in accordance with all applicable law.

Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) Please provide the name of any parent companies that this financial institution is operating in contract with in respect to the claim herein
- 2) Please provide the EIN number and CUSIP number of this company/corporation/financial institution
- 3) Please provide an affidavit stating that you have enforceable payment interest in the contract account # 4266841333737086 based on SEC files including all prospectuses 10-K registrations 8-K registrations and all other SEC documents pertaining to the above mentioned claim
- 4) Please provide documents pertaining to any stock, securities, bonds etc associated with this specific account number.
- 5) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 6) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.  
You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Chase  
allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of Request

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_

Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_

Notary Signature \_\_\_\_\_

## Freedom of Information Request & Request for Affidavit Certifying Affirmation of Statutory Obligation made to

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide a copy of the original contract (Authenticum) Pursuant to (Carpenter vs. Logan 83 U.S. 271) certifying that they are the actual holder of the original instrument of question and are willing to have it inspected for authenticity in regards to alleged account number # 20597857 under CUSIP Number

and to provide an Affidavit Certifying their Affirmation that they followed all applicable Federal, State, and contract law in carrying out the alleged contract of note Account # 20597857 to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim as an Creditor and Holder in Due Course. Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) You produce the original contract (for inspection), front and back pages, with my original signature (no copies) in respect to the alleged contract and state for the record who the alleged original creditor was or Current holder of Original Contract is based on the preceding law
- 2) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 3) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.

You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Cavalry Port allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of Request \_\_\_\_\_

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_

Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_

Notary Signature \_\_\_\_\_



## Freedom of Information Request For SEC Registration Status & Securitization Inquiry

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide information from their SEC files or from the files of their Parent Company in reference to alleged account number # 20597857

This demand is made to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim and interest in respect to the contract-note-security-bond in accordance with all applicable law.

Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) Please provide the name of any parent companies that this financial institution is operating in contract with in respect to the claim herein
- 2) Please provide the EIN number and CUSIP number of this company/corporation/financial institution
- 3) Please provide an affidavit stating that you have enforceable payment interest in the contract account # 20597857 based on SEC files including all prospectuses 10-K registrations 8-K registrations and all other SEC documents pertaining to the above mentioned claim
- 4) Please provide documents pertaining to any stock, securities, bonds etc associated with this specific account number.
- 5) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 6) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.

You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Cavalry Port allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of Request

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_  
Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_  
Notary Signature \_\_\_\_\_

## Freedom of Information Request & Request for Affidavit Certifying Affirmation of Statutory Obligation made to

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide a copy of the original contract (Authenticum) Pursuant to (Carpenter vs. Logan 83 U.S. 271) certifying that they are the actual holder of the original instrument of question and are willing to have it inspected for authenticity in regards to alleged account number # 426937100362756 under CUSIP Number

and to provide an Affidavit Certifying their Affirmation that they followed all applicable Federal, State, and contract law in carrying out the alleged contract of note Account # 426937100362756 to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim as an Creditor and Holder in Due Course. Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) You produce the original contract (for inspection), front and back pages, with my original signature (no copies) in respect to the alleged contract and state for the record who the alleged original creditor was or Current holder of Original Contract is based on the preceding law
- 2) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 3) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.  
You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: City bank  
allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of Request \_\_\_\_\_

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*

Signature of Agent:

County \_\_\_\_\_ State \_\_\_\_\_

Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_

Notary Signature \_\_\_\_\_

## Freedom of Information Request For SEC Registration Status & Securitization Inquiry

Name of Financial Institution:

Name of Trustees, Beneficial Owners etc:

Name of CEO Director:

**NOTE: Please be aware that acts under color of authority are against the law and you can be sued in federal court pursuant to Public Volume 17 42<sup>nd</sup> Congress Stat 13-15 shown as code at USC title 42 section 1983 for Actions under Color of Authority or Fraudulent and or illegal transactions**

The purpose of this Freedom of Information request is for the Director(s) of this Financial Institution and Actual Owner Institutions who are under oath and obligation to United States Laws and statute to provide information from their SEC files or from the files of their Parent Company in reference to alleged account number # 4269371003692756

This demand is made to satisfy the requester that this Financial entity is operating within the bounds of the law that the Financial entity is subject to and that they have a legitimate claim and interest in respect to the contract-note-security-bond in accordance with all applicable law.

Specifically the Law includes the National Bank Act also known as the National Currency Act The Consumer Credit Protection Act, The Fair Debt Collections Practices Act, The Fair Credit Reporting Act, the Truth in Lending Act and any and all laws applicable to Financial Institutions whether they be federal, state, or contractual (commercial) laws.

I am officially requesting the following:

- 1) Please provide the name of any parent companies that this financial institution is operating in contract with in respect to the claim herein
- 2) Please provide the EIN number and CUSIP number of this company/corporation/financial institution
- 3) Please provide an affidavit stating that you have enforceable payment interest in the contract account # 4269371003692756 based on SEC files including all prospectuses 10-K registrations 8-K registrations and all other SEC documents pertaining to the above mentioned claim
- 4) Please provide documents pertaining to any stock, securities, bonds etc associated with this specific account number.
- 5) Provide an Affidavit Certifying that you did not breach any federal state contractual commercial or official oath or laws in carrying out the alleged contract and associated transactions
- 6) Certify that you did not unlawfully without my consent use my signature to materially alter, falsely endorse, stamp or convert any contract bearing my name or signature, into a security, in order to convert my contract into assets, or gain assets from a third party. You MUST Certify and prove that you are an actual LENDER and that you did not commit any action that would preclude that you used my identity in a fraudulent or illegal manner in Violation of Law and (FEDERAL TRADE COMMISSION (FTC) Policy, yourself or in collusion with a third party or additional parties.

You are bound by law to provide this information upon a request pursuant to FOIA USC 5 section 552 and the Fair Debt Collections Practices Act along with the aforementioned laws

Said Directors, Managers, Supervisors, and Employees in the name of Name of Financial Institution: Citi bank allegedly executed a contract with the requester and it is affirmed by requester that they violated the law in their actions of alleging the requester owes them a debt.

[Receiver Name]

[Business Correspondence Address]

City, State Zip

Name of Agent Authorizing Transaction:

Title of Agent:

Date

Bureau/ Agency of the Department

If Needed: Reason based on Internal Policy and or Laws and Statutes for Rejection of Request \_\_\_\_\_

\*\*\*If you are willing to settle this manner with complete removal of this alleged debt please respond with the appropriate offer and I will hold all parties harmless after complete voiding of the alleged claim\*\*\*


Signature of Agent:


County \_\_\_\_\_ State \_\_\_\_\_

Sworn and Subscribed before me \_\_\_\_\_ this [day] \_\_\_\_\_ [month] \_\_\_\_\_ [year] \_\_\_\_\_

Notary Signature \_\_\_\_\_



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <b>SIENNEAULICKS</b></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p><b>Equifax Customer Relations</b> <b>P.O. Box 740241</b> <b>Atlanta, GA 30374</b></p>  <p>9590 9402 4646 8323 5648 12</p>		<p>B. Received by (Print Name)</p> <p>C. Date of Delivery <b>JAN 23 2019</b></p>	
<p>2. Article Number (Transfer from service label)</p> <p>PS F</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
		<p>8923</p>	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X <b>R. B. Ruddy</b></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p><b>Citibank Customer Service</b> <b>P.O. Box 6500</b> <b>Sioux Falls, SD 57117</b></p>  <p>9590 9402 4646 8323 5647 51</p>		<p>B. Received by (Print Name) <b>Rodriguez</b></p> <p>C. Date of Delivery <b>JAN 23 2019</b></p>	
<p>2. Article Number (Transfer from service label)</p> <p>PS Form 3811, July 2015 PSN 7530-02-000-6</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
		<p>7018 2290 0000 3088 8954</p>	



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chase Card Service  
P.O. Box 15298  
Wilmington, DE 19850



9590 9402 4646 8323 5648 36

2. Article Number (Transfer from service label)

PS Form 3811, July 2015 PSN 7530-02-001

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

RECEIVED

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

JAN 22 2019

Brahima Traore

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

7018 2290 0000 3088 8909

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cavalry Portfolio Services  
Attn: Customer Care  
500 Summit Lake Drive, Suite 400  
Valhalla, NY 10595



9590 9402 4646 8323 5647 68

2. Article Number (Transfer from service label)

PS Form 3811, July 2015 PSN 7530-02-001

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Dany Velaz

C. Date of Delivery

1/22/19

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

7018 2290 0000 3088 8893

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Trans-Union Customer Ret  
P.O. Box 1000  
Chester, PA 19022



9590 9402 4646 8323 5648 05

2. Article Number (Transfer from service label)

PS Form 3811, July 2015 PSN 7530-02-000-9

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Insured Mail Restricted Delivery (over \$500)☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

7018 2290 0000 3088 8961

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Experian Customer Relation  
P.O. Box 2002  
Allen, TX 75013



9590 9402 4646 8323 5647 82

2. Article Number (Transfer from service label)

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9

7018 2290 0000 3088 8930

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Citibank Customer Service  
P.O. Box 6500  
Sioux Falls, SD 57117



9590 9402 4646 8323 5647 99

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-

7018 2290 0000 3088 8947

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Capital One  
P.O. Box 30277  
Salt Lake City, UT 84130-0277



9590 9402 4646 8323 5648 29

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

JAN 22 2019

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-

7018 2290 0000 3088 8916